PTO/SB/22 (12-04)

	Under the Paperwork Reduction Act of 1995, no persons are requin		Approved for use through 7/31 Trademark Office; U.S. DEPARTM of information unless it displays a v	MENT OF COMMERCE			
PETITIO	ON FOR EXTENSION OF TIME UNDER 3 FY 2005	Docket Number: 14066	Docket Number: 14066.0004				
۸.	(fees effective on or after December 8	, 2004)					
Application	on Number: 10/813,357	Filed: March 31, 200	Filed: March 31, 2004				
For: A	SYNCHRONOUS ENHANCED SHARED SECI	RET PROVISIONI	NG PROTOCOL				
Art Unit: 2134 Examiner: Roderick Tolentino							
application		•					
The reque	ested extension and fee are as follows (check time pe	eriod desired and ent	er the appropriate fee below	<b>')</b> :			
	One month (37 CFR 1.17(a)(1))	<u>Fee</u> \$120	Small Entity Fee \$60	\$ <u>00.00</u>			
	☐ Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$ 00.00			
		\$1020	\$510	\$510.00			
	☐ Four months (37 CFR 1.17(a)(4))	\$1590	\$795	<b>\$</b>			
	Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$			
	Applicant claims small entity status. See 37	,					
	A check in the amount of the fee is enclosed	<b>l.</b>					
	Payment by credit card. Form PTO-2038 is a	attached.					
$\boxtimes$	The Director has already been authorized to	charge fees in this	s application to a Deposit	Account.			
	The Director is hereby authorized to charge overpayment, to Deposit Account Number 1	•	•	*			
	NING: Information on this form may become pub form. Provide credit card information and authori			cluded on			
I am th	e applicant/inventor.						
	assignee of record of the entire interest. See 37 CFR 3.71						
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).							
☑ attorney or agent of record. Registration Number <u>34,184</u>							
	attorney or agent under 37 CFR 1	.34.					
	Registration number if acting under 37	CFR 1.34					
>	unt france		March 7, 2007				
	Signature		Date				
	Stuart T. F. Huang		202-429-3000				
NOTE: Sign	Typed or printed name natures of all the inventors or assignees of record of the entir	e interest or their repres	Telephone Number sentative(s) are required. Subm	it multiple forms if			

more than one signature is required, see below.

 $oxed{\boxtimes}$  Total of  $\underline{1}$  forms are submitted.

MAR OT 2001 W

Effetive 12/08/2004. Complete if Known pursuant to the Consolidated Appropriations Act, 2005 (H.R.4818) 10/813,357 Application Number Filing Date March 31, 2004 **FEE TRANSMITTAL** First Named Inventor Donald A. Zick For FY 2005 Art Unit 2134 Applicant claims small entity status. See 37 CFR 1.27 **Examiner Name** Roderick Tolentino TOTAL AMOUNT OF PAYMENT \$510.00 14066.0004 Attorney Docket Number

METHOD OF PA	YMENT (check	all that a	ipply)				
Check Cre	<b>—</b> …	oney Ord	- — · · · · · · ·	***	please identify):		
Deposit Account	Deposit Account Num	<sub>ber:</sub> 19-4	293 De	posit Account Name	Steptoe	<u>&amp; Johnson</u>	<u>LLP</u>
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
Charge fee(s	Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee						filing fee
	additional fee(s) or ir 37 CFR 1.16 and is form may become pul	1.17	<u> </u>	edit any overpa		Provide credit card in	formation and
FEE CALCULATION							
1. BASIC FILING,SEAR	RCH, AND EXAMI	NATION	FEES				
	FILING F	EES	SEAR	CH FEES	EXAMIN	ATION FEES	
Application Type	Fee (\$)	mall Entit Fee(\$)	Y <u>Fee(\$)</u>	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FE	ES						Small Entity
Fee Description						Fee (\$)	Fee (\$)
Each claim over 20 (inclu		couos)				50 200	25 100
Each independent claim Multiple dependent claim		ssues)				360	180
Mattiple dependent dam	ij					000	100
Total Claims	Extra Claims	Fee(\$)	Fee Paid(\$)	<u>!</u>	Multiple Depe	ndent Claims	
-20 or H		x 50	= \$0.00	-	Fee(\$)	Fee Paid (\$)	
HP = highest number of to			F D-1-4(A)				
Indep. Claims -3 or HP	Extra Claims	Fee(\$) x200	Fee Paid(\$) = \$0.00				
HP = highest number of in							
The Thighest Humber of the	dependent damis paid t	or, ii greater	dian 5				
3. APPLICATION SIZE	FEE						
If the specification and 37 CFR 1.52(e)), the thereof. See 35 U.S	e application size fe	ee due is	\$250 (\$125 for sr				
Total Sheets	Extra Sheets		oer of each addit	ional 50 or fra	ction thereo	f Fee (\$)	Fee Paid (\$)
• 100 =	0	Mann	ei oi eacii addii	0	Mon thereo	\$250	\$0
	d <b>up</b> to a whole nui	mber)		•		Ψ200	ΨU
, ouite	p to a miloto ilai						
4. OTHER FEE(S)	Petition for	Three	Month Ev	tansian a	f Tima		
OTHER FEE(3)		11116				•	510 00
1						35	5 IU UU

SUBMITTED BY	1/1/1			1	1
Signature	> Mil sug	Registration No.	34,184	Telephone	(202) 429-3000
Name (Print/Type)	Stuart T. F. Huang			Date	March 7, 2007